For Internal Use Only: Voucher #: DATE: By:	Stor pass	State Agency Rider (STAR) Pass Mason Transit Subsidy Tracking Calendar				
NAME		AGENCY				
WORK PHONE	MAIL STOP	STAR Pass Coordinator's Name				
PLEASE READ THESE INSTRUCTIONS CAREFULLY!						

The STAR Pass is not valid on **Mason Transit** routes. Use this form to track your **one-way commute** trips taken on Mason Transit buses. To be eligible for the subsidy you must: 1) have a STAR Pass; 2) be registered with WSDOT; and 3) be assigned to a worksite in Thurston County. To receive a subsidy for each of your **one-way commute trips** taken on a Mason Transit bus, you must complete this calendar. **Note**: You may receive this subsidy **in addition** to any you receive from your agency as long as collectively you are not receiving more than the cost of a monthly bus pass in **tax-free vouchers**. Questions? Call 705-7916 or e-mail CTRMail@ga.wa.gov.

You may receive your STAR Pass subsidy by submitting this trip tracking calendar showing 25 one-way commute trips on a Mason Transit bus. You will receive a Commute Bonus Voucher worth \$11 that may be used towards the purchase of a monthly Mason Transit pass.

Once the trip calendar has been completed, sign and date it. Submit the completed calendar to your agency Employee Transportation Coordinator (ETC) or STAR Pass Coordinator for signature. Send signed calendar to WSDOT: MS 47387. You will receive an \$11 Commuter Bonus Voucher for every 25 commute trips taken on a Mason Transit bus.

One-way commute trips taken on Mason Transit between (dates*) ______ and _____

1: date:		2: date:		3: date		4: date		5: date		6: date		7: date	
AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM
(Circle	One)	(Circle	One)	(Circle	One)	(Circle	One)	(Circle	One)	(Circle	One)	(Circle	One)
8: date		9: date		10: date		11: date)	12: date)	13 : date)	14: date)
AM	РМ	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM
(Circle	One)	(Circle	One)	(Circle	e One)	(Circle	One)	(Circle	One)	(Circle	One)	(Circle	One)
15: date	!	16: date		17: date	•	18: date)	19: date		20 : date)	21: date)
AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM
(Circle	One)	(Circle	One)	(Circle	One)	(Circle	One)	(Circle	One)	(Circle	One)	(Circle	One)
22 : date 23 : date		24 : date 25 : date											
AM	PM	AM	PM	AM	PM	AM	PM	Exchan	ge 25 or	ne-way co	ommute	trips for	an \$11
(Circle One) (Circle One)		(Circle	(Circle One) (Circle One)		Commuter Bonus Voucher								

I certify that this information is accurate and complete and that I meet the STAR Pass eligibility requirements: 1) I have a STAR Pass;
2) I am registered with the State Agency CTR program at the Department of Transportation; and 3) I am assigned to a worksite in
Thurston County. (Register on line at www.ga.wa.gov/CTR/starpass.html or by e-mail CTRMail@ga.wa.gov)

The commute trips recorded above were taken on Mason Transit buses. I understand that I may be denied the subsidy (\$11 voucher) if I provide inaccurate information or am found to be ineligible for the STAR Pass subsidy for rides taken on a Mason Transit bus.

Employee Signature	Date	STAR Pass Coordinator Signature	Date